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REISSUE PATENT APPLICATION TRANSMITTAL

Address to:

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Attorney Docket No.	2271/53467-A1
First Named Inventor	Sunichi SATO
Original Patent Number	5,904,549
Original Patent Issue Date (Month/Day/Year)	05/18/1999
Express Mail Label No.	EV 325702590 US

APPLICATION FOR REISSUE OF:
(Check applicable box) Utility Patent Design Patent Plant Patent

APPLICATION ELEMENTS (37 CFR 1.173)

- Fee Transmittal Form (PTO/SB/56)
(Submit an original, and a duplicate for fee processing)
- Applicant claims small entity status. See 37 CFR 1.27.
- Specification and Claims in double column copy of patent format (amended, if appropriate)
- Drawing(s) (proposed amendments, if appropriate)
- Reissue Oath/Declaration (original or copy)
(37 C.F.R. § 1.175) (PTO/SB/51 or 52)
- Power of Attorney
- Original U.S. Patent currently assigned? Yes No
(If Yes, check applicable box(es))
 - Written Consent of all Assignees (PTO/SB/53)
 - 37 C.F.R. § 3.73(b) Statement (PTO/SB/96)
- CD-ROM or CD-R in duplicate, Computer Program (Appendix) or large table
- Nucleotide and/or Amino Acid Sequence Submission
(if applicable, all of the following are necessary)
 - a. Computer Readable Form (CRF)
 - b. Specification Sequence Listing on:
 - i CD-ROM (2 copies) or CD-R (2 copies); or
 - ii paper
 - c. Statements verifying identity of above copies

ACCOMPANYING APPLICATION PARTS

10. Statement of status and support for all changes to the claims. See 37 CFR 1.173 (c).
11. Original U.S. Patent for surrender
 - Ribboned Original Patent Grant
 - Statement of Loss (PTO/SB/55)
12. Foreign Priority Claim (35 U.S.C. 119) (if applicable)
13. Information Disclosure Statement (IDS)/PTO-1449 Copies of IDS Citations
14. English Translation of Reissue Oath/Declaration (if applicable)
15. Preliminary Amendment
16. Return Receipt Postcard (MPEP 503)
(Should be specifically itemized)
17. Other: _____

02499 U.S. PTO
10/603418
06/24/03

18. CORRESPONDENCE ADDRESS

Customer Number or Bar Code Label **23432** or Correspondence address below
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Name	PATENT TRADEMARK OFFICE		
Address			
City	State	Zip Code	Fax
Country	Telephone		

NAME (Print/Type)	Iyan S. Kavrukov	Registration No. (Attorney/Agent)	25,161
Signature	<i>Iyan S. Kavrukov</i>	Date	June 24, 2003

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Reissue, Washington, DC 20231.

The PTO did not receive fee for which listed item(s) drawing page 4 and 6

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REISSUE APPLICATION FEE TRANSMITTAL FORM

Docket Number (Optional)

2271/53467-A1

Claims as Filed - Part 1

Claims in Patent		Number Filed in Reissue Application	(3) Number Extra	Small Entity		Other than a Small Entity	
				Rate	Fee		Rate
(A) 21	Total Claims (37 CFR 1.16(j))	(B) 38	**** 17 =	x \$ _____ =		or	x \$ 18 = 306.00
(C) 6	Independent claims (37 CFR 1.16(i))	(D) 21	* 15 =	x \$ _____ =			x \$ 84 = 1260.00
Basic Fee (37 CFR 1.16(h)) \$ _____					\$750.00		
Total Filing Fee \$ _____					OR \$2316.00		

Claims as Amended - Part 2

	(1) Claims Remaining After Amendment		(2) Highest Number Previously Paid For	(3) Extra Claims Present	Small Entity		Other than a Small Entity	
					Rate	Fee		Rate
Total Claims (37 CFR 1.16(j))	***	MINUS	**	* =	x \$ _____ =		x \$ _____ =	
Independent Claims (37 CFR 1.16(i))	***	MINUS	*****	=	x \$ _____ =		x \$ _____ =	
Total Additional Fee \$ _____					OR \$ _____			

* If the entry in (D) is less than the entry in (C), Write "0" in column 3.

** If the "Highest Number of Total Claims Previously Paid For" is less than 20, Write "20" in this space.

*** After any cancellation of claims.

**** If "A" is greater than 20, use (B - A); if "A" is 20 or less, use (B - 20).

***** "Highest Number of Independent Claims Previously Paid For" or Number of Independent Claims in Patent (C).

 Applicant claims small entity status. See 37 CFR 1.27. Please charge Deposit Account No. _____ in the amount of _____.
A duplicate copy of this sheet is enclosed. The Commissioner is hereby authorized to charge any additional fees under 37 CFR 1.16 or 1.17 which may be required, or credit any overpayment to Deposit Account No. 03-3125.
A duplicate copy of this sheet is enclosed. A check in the amount of \$ 2316.00 to cover the filing / additional fee is enclosed. Payment by credit card. Form PTO-2038 is attached.**WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**June 24, 2003

Date

Signature of Applicant, Attorney or Agent of Record

Ivan S. Kavrukov

Typed or printed name

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Reissue Application Of: Shunichi SATO
For: METHODS FOR GROWING SEMICONDUCTORS AND
DEVICES THEREOF FROM THE ALLOY
SEMICONDUCTOR GAINNAS
Reissue Application No.: Continuation of Reissue Application S.N. 09/860,369
Reissue Application Filing Date: Concurrently herewith
Original Patent No.: 5,904,549
Original Patent Granted On: May 18, 1999
1185 Avenue of the Americas
New York, New York 10036
Mail Stop Reissue
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

EXPRESS MAIL LETTER OF TRANSMITTAL

Express Mail mailing label number EV325702590US
Date of Deposit June 24, 2003

Sir:

I hereby certify that the above-identified continuation reissue application (consisting of the Abstract, 6-page specification, 21 original cancelled patent claims, 7 sheets of formal drawings, Cont. Reissue Application Declaration by Inventor, Consent of Assignee, Statement under 37 C.F.R. 3.73(b), Statement Pursuant to 37 CFR 1.173(c), Preliminary Amendment, 3 copies of transmittal form, and check for the \$2,316 filing fee) is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 C.F.R. § 1.10 on the date indicated above and is addressed to Mail Stop Reissue, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.


Cooper & Dunham Employee   ISCOA
Depositing Express Mail Material

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